CBT-100

FEDERAL EMPLOYER I.D. NUMBER

Check if applicable

4. a) Total nonoperational income \$_

CORPORATION NAME

MAILING ADDRESS

CITY

20

SIGNATURE AND VERIFICATION (See Instruction 14)

Interest

26. Amount of Item 25 to be



STATE

□ Inactive

18. Key Corporation Throw Out Payment (Form 400)

Interest from CBT-160

24. Total Balance Due - line 22 plus line 23

Professional Corporation Fees (Schedule PC. line 5)

TOTAL TAX AND PROFESSIONAL CORPORATION FEES (Sum of lines 15, 16, 17, 18 and 19)

a) Payments made by Partnerships on behalf of taxpayer (attach copies of all NJ-K-1's)

Penalty __

☐ 1120-S filer

□ Initial return

23. Penalty and Interest Due - (see instructions 7(e) and 48).

25. If line 21 plus 21(a) is greater than line 20 plus line 23,

enter the amount of overpayment

Credited to 2006 return

NEW JERSEY CORPORATION BUSINESS TAX RETURN

FOR TAXABLE YEARS ENDING ON OR AFTER JULY 31, 2005 THROUGH JUNE 30, 2006

Taxable year beginning _, and ending __ Type or print the requested information. Check if address change appears below. □ State and date of incorporation N.J. CORPORATION NUMBER Date authorized to do business in N.J. Federal business activity code Corporation books are in the care of Telephone Number ZIP CODE **DIVISION USE** 1. 2. Allocation factor from Schedule J, Part III, line 5. Non-allocating taxpayers should not make an entry on line 2 2 3. Allocated net income - Multiply line 1 by line 2. Non-allocating taxpayers must enter the amount from 3 line 1 on this line (Schedule O, Part I) (see instruction 39) 4(b) 5. 6 7. Real Estate Investment Trust - Enter 4% of line 1 7. Tax Base - Enter amount from line 5, 6 or 7, whichever is applicable 8. Amount of Tax - Multiply line 8 by the applicable tax rate (see instruction 11(a)) 9 10. Credit for taxes paid to other jurisdictions (see instruction 33(a)) 11. 12 TOTAL CBT TAX LIABILITY - line 11 minus line 12 13. 14. Alternative Minimum Assessment (Schedule AM, Part VI, line 5) ☐ Check and enter zero if AMA paid by a Key Corporation (see instruction 22) 14 15 16. INSTALLMENT PAYMENT (see instruction 46) 16 17.

18.

19

21

23

DIVISION USE

I declare under the penalties provided by law, that this return (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete return. If the return is prepared by a person other than the taxpayer, his declaration is based on all the information relating to the matters required to be reported in the return of which he has knowledge.

Refunded

| (Signature of Duly Authorized Officer of Taxpayer) | | (Title) |
|--|--|--|
| | | |
| (Signature of Individual Preparing Return) | (Address) | (Preparer's ID Number) |
| (Name of Tax Preparer's Employer) | (Address) | (Employer's ID Number) |
| | (Signature of Individual Preparing Return) | (Signature of Individual Preparing Return) (Address) |



WEB

NAME AS SHOWN ON RETURN FEDERAL ID NUMBER

| SCH | TEDULE A COMPUTATION OF ENTIRE NET INCOME (SEE INSTRUCTION 16) EVERY CORPORATION MUST COMPLETE LINES 1 - 38 OF THIS SCHEI | DULE. |
|----------------------|---|-------|
| 1 | Gross receipts or sales Less returns and allowances | 1 |
| 2. | Less: Cost of goods sold (Schedule A-2, line 8) | 2 |
| 3. | Gross profit - Subtract line 2 from line 1 | |
| 4. | Dividends | |
| 5. | Interest | 5 |
| 6. | Gross rents | 6 |
| 7. | Gross royalties | 7 |
| 8. | Capital gain net income (attach separate Federal Schedule D) | 8 |
| 9. | Net gain or (loss) from Federal Form 4797 (attach Federal Form 4797) | 9 |
| 10. | Other income (attach schedule) | |
| 11. | TOTAL INCOME - Add lines 3 through 10 | |
| 12. | Compensation of officers (Schedule F) | 12 |
| 13. | Salaries and wages Less jobs credit Balance | 13 |
| 14. | Repairs (Do not include capital expenditures) | 14 |
| 15. | Bad debts | 15 |
| 16. | Rents | 16 |
| 17. | Taxes | |
| 18. | Interest | |
| 19. | Contributions | 19 |
| 20a. | Depreciation from Federal Form 4562 (attach copy) | |
| 20b. | Less depreciation claimed in Schedule A and elsewhere on return . 20b | 20c |
| 21. | Depletion | |
| 22. | Advertising | |
| 23. | Pension, profit-sharing plans, etc. | |
| 24. | Employee benefit programs | |
| 25. | Domestic production activities deduction | |
| 26. | Other deductions (attach schedule) | |
| 27. | TOTAL DEDUCTIONS - Add lines 12 through 26 | 27 |
| 2 7. ■ 28. | Taxable income before net operating loss deductions and special deductions (line 11 less | 21 |
| | line 27 must agree with line 28, page 1 of the Unconsolidated Federal Form 1120, or the | |
| | _appropriate line item from the Federal Forms 1120-IC-DISC, 1120-FSC or 1120-A, whichever | |
| | is applicable. (see instructions 8(b) and 16(c)) | 28 |
| | NEW JERSEY ADJUSTMENTS LINES 29 - 38 MUST BE COMPLETED ON THIS FORM | |
| 29. | Interest on Federal, State, Municipal and other obligations not included in Item 5 above | 20 |
| 00 | (see instruction 16(d)) | 29 |
| 30. | Related interest addback (Schedule G, Part I) | 30 |
| 31. | New Jersey State and other states taxes deducted above (see instruction 16(f)) | 31 |
| 32. | Depreciation and other adjustments from Schedule S (see instruction 44) | 32 |
| 33. | (a) Deduction for IRC Section 78 Gross-up not deducted at line 37 below | 33(a) |
| | (b) Other deductions and additions. Explain on separate rider. (see instruction 16(h)) | 33(b) |
| | (c) Elimination of nonoperational activity (Schedule O, Part I) | 33(c) |
| 0.4 | (d) Interest and intangible expenses and costs addback (Schedule G, Part II). | 33(d) |
| 34. | Entire net income before net operating loss deduction and dividend exclusion (total of lines 28 through 33 inclusive) | 34 |
| 35. | Net operating loss deduction from Form 500 | 35 |
| 36. | Entire Net Income before dividend exclusion (line 34 minus line 35) | 36 |
| 37. | Dividend Exclusion from Schedule R, line 7. (see instruction 16(j)) | 37 |
| 38. | ENTIRE NET INCOME (line 36 minus line 37 - carry to page 1, line 1) | 38 |



WEB

| NAME AS SHOWN ON RETURN | FEDERAL ID NUMBER |
|-------------------------|-------------------|
| | |

SCHEDULE A-1 NET OPERATING LOSS DEDUCTION AND CARRYOVER

NOTE: SCHEDULE A-1 HAS BEEN REPLACED BY FORM 500. NET OPERATING LOSSES MUST BE DETAILED ON FORM 500 WHICH IS AVAILABLE SEPARATELY. TO OBTAIN THIS FORM AND RELATED INFORMATION, REFER TO THE INDEX ON PAGE 13.

| SCHEDULE A-2 COST OF GOODS SOLD (See Instruction 18) | |
|--|-----|
| 1. Inventory at beginning of year | 1. |
| 2. Purchases | 2. |
| 3. Cost of labor | 3. |
| 4. Additional section 263A costs | 4. |
| 5. Other costs (attach schedule) | 5. |
| 6. Total - Add lines 1 through 5 | 6. |
| 7. Inventory at end of year | 7. |
| 8. Cost of goods sold - Subtract line 7 from line 6. Enter here and on Schedule A, line 2 | 8. |
| SCHEDULE A-3 SUMMARY OF TAX CREDITS (See Instruction 19) | |
| 1. HMO Assistance Fund Tax Credit from Form 310 | 1. |
| 2. New Jobs Investment Tax Credit from Form 304 | 2. |
| 3. EITHER: a) Urban Enterprise Zone Employee Tax Credit from Form 300 | |
| OR b) Urban Enterprise Zone Investment Tax Credit from Form 301 | 3. |
| 4. Redevelopment Authority Project Tax Credit from Form 302 | 4. |
| 5. Recycling Equipment Tax Credit from Form 303 | 5. |
| 6. Manufacturing Equipment and Employment Investment Tax Credit from Form 305 | 6. |
| 7. Research and Development Tax Credit from Form 306 | 7. |
| 8. Smart Moves For Business Programs Tax Credit from Form 307 | 8. |
| 9. Small New Jersey-Based High-Technology Business Investment Tax Credit from Form 308 | 9. |
| 10. Neighborhood Revitalization State Tax Credit from Form 311 | 10. |
| 11. Effluent Equipment Tax Credit from Form 312 | 11. |
| 12. Economic Recovery Tax Credit from Form 313 | 12. |
| 13. Remediation Tax Credit from Form 314 | 13. |
| 14. AMA Tax Credit from Form 315 | 14. |
| 15. Other Tax Credits (see instruction 45(o)) | 15. |
| 16. Total tax credits taken on this return - Add lines 1 through 15. Enter here and on page 1, line 12 | 16. |



WEB

ALL CORPORATIONS MUST COMPLETE THIS SCHEDULE AND SUBMIT IT WITH THEIR CBT-100 TAX RETURN

| NAME AS SHOWN ON RETURN | | | FEDERAL ID NUMBER | |
|--|---------------------------|----------------------------------|--------------------------|-----------|
| SCHEDULE A-4 SU | | | | |
| Net Operating Loss Deduction | | 6. Schedule J | , Part III, line 2(g) 6. | |
| and Carryover 1. Form 500 | 1 | 7. Schedule J | , Part III, line 2(h) 7. | |
| | | 8. Schedule J | , Part III, line 2(j) 8. | |
| Interest and Intangible Costs an Expenses | a | 9. Schedule J | , Part III, line 3(c) 9. | |
| 2. Schedule G, Part I, line b | 2. | Non-Operationa | al Income Information | |
| 3. Schedule G, Part II, line b | 3. | 10. Schedule C |), Part III, line 31 10. | |
| Schedule J Information | | Dividend Exclu | sion Information | |
| 4. Schedule J, Part III, line 1(c) | 4. | 11. Schedule F | R, line 4 | |
| 5. Schedule J, Part III, line 2(f) . | 5. | 12. Schedule R | R, line 6 | |
| Historical Information (All Corporations) | Year 2002 | Year 2003 | Year 2004 | Year 2005 |
| 13. Schedule AM, Part III, line 1 | | | | |
| 14. Schedule AM, Part III, line 2 | | | | |
| SCHEDULE A-5 FE | DERAL IRC SECTION | N 199 ADJUSTMENT (See | Instruction 21) | |
| 1. Federal Section 199 Dome | estic Production expens | ed in arriving at federal taxabl | e income 1. | |
| 2. Less: New Jersey Separa | ate Entity Domestic Prod | luction allowed from Form 501 | 1 2. | |
| 3. Net Section 199 adjustme | nt - line 1 minus line 2. | Include on Schedule A, line 3 | 3(b) 3. | |
| | | | | |

| SC | SCHEDULE AM ALTERNATIVE MINIMUM ASSESSMENT FOR C CORPORATIONS (See Instruction 22) | | | | | | | | |
|---|--|--|---|------------------|------|---------------------------------|--|--|--|
| PA | ARTI COM | PUTATION OF NEW JERSEY | GROSS RECEIPTS | | | | | | |
| 1. | Enter sales of tangible personal property shipped to points within New Jersey | | | | | | | | |
| 2. | 2. Enter services performed in New Jersey | | | | | | | | |
| 3. | Enter rentals o | of property situated in New Jers | sey | | 3 | | | | |
| 4. | Enter royalties | for the use in New Jersey of p | patents and copyrights | | 4 | | | | |
| 5. | Enter all other | business receipts earned in N | ew Jersey | | 5 | | | | |
| 6. | Total New Jers | sey Gross Receipts | | | 6 | | | | |
| PA | RT II COM | PUTATION OF NEW JERSEY | GROSS PROFITS | | | | | | |
| 1. | Enter New Jer | sey Gross Receipts from Part | I, line 6 | | 1. | | | | |
| 2. | Enter Cost of 0 | Goods Sold amount from Sche | edule A-2, line 8 | | 2. | | | | |
| 3. | Enter the Alloc | ation Factor or Receipts Factor | or from Schedule J (Non-alloca | tors enter 100%) | 3. | | | | |
| 4. | New Jersey Co | ost of Goods Sold - multiply lin | e 2 by line 3 | | 4. | | | | |
| 5. | New Jersey G | ross Profits - subtract line 4 fro | om line 1 | | 5. | | | | |
| PA | RT III GRO | SS SALES AND COST OF GO | OODS SOLD FOR CURRENT | AND PRIOR YEARS | | | | | |
| | | Year 2002 | Year 2003 | Year 2004 | | Year 2005 From Part II Above | | | |
| 1. | NJ Gross receipts | | | | | | | | |
| 2. | NJ Cost of Goods Sold | | | | | | | | |
| PA | RT IV ALTE | RNATIVE MINIMUM ASSESS | MENT BASED UPON GROSS | PROFITS | | | | | |
| 1. | | | m Part II, line 5; if less than \$1 | , , , | 1 | | | | |
| 2. | • | ater than \$1,000,000, but not c ater than \$10,000,000 then go | over \$10,000,000, complete line to line 4. | 3. | | | | | |
| 3. | (a) Maximum | exclusion amount | | | 3(a) | \$1,000,000 | | | |
| | (b) Subtract li | ine 3(a) from line 1 | | | 3(b) | | | | |
| | (c) Multiply lir | ne 3(b) by .0025 | | | 3(c) | | | | |
| (d) Multiply line 3(c) by 1.11111, the NJ AMA Exclusion Rate | | | | | | | | | |
| 4. | | | | | | | | | |
| | (b) If line 1 is | greater than \$15,000,000, but | not over \$25,000,000, multiply | line 1 by .006 | 4(b) | | | | |
| | (c) If line 1 is | greater than \$25,000,000, but | not over \$37,500,000, multiply | line 1 by .007 | 4(c) | | | | |
| | | | | • | 4(d) | | | | |
| (d) If line 1 is greater than \$37,500,000, multiply line 1 by .008 | | | | | | | | | |

| PART V ALTERNATIVE MINIMUM ASSESSMENT BASED UPON GROSS RECEIPTS | | |
|--|------|-------------|
| New Jersey Gross Receipts - enter amount from Part I, line 6; if less than \$2,000,000, enter zero on line 5 and go to Part VI | 1 | |
| 2. If line 1 is greater than \$2,000,000, but not over \$20,000,000, complete line 3. If line 1 is greater than \$20,000,000 then go to line 4. | | |
| 3. (a) Maximum exclusion amount | 3(a) | \$2,000,000 |
| (b) Subtract line 3(a) from line 1 | 3(b) | |
| (c) Multiply line 3(b) by .00125 | 3(c) | |
| (d) Multiply line 3(c) by 1.11111, the NJ AMA Exclusion Rate | 3(d) | |
| 4. (a) If line 1 is greater than \$20,000,000, but not over \$30,000,000, multiply line 1 by .00175 | 4(a) | |
| (b) If line 1 is greater than \$30,000,000, but not over \$50,000,000, multiply line 1 by .003 | 4(b) | |
| (c) If line 1 is greater than \$50,000,000, but not over \$75,000,000, multiply line 1 by .0035 | 4(c) | |
| (d) If line 1 is greater than \$75,000,000, multiply line 1 by .004 | 4(d) | |
| 5. AMA based on Gross Receipts - amount from line 3(d) or 4(a), 4(b), 4(c), or 4(d) | 5 | |
| PART VI CORPORATION BUSINESS TAX/ALTERNATIVE MINIMUM ASSESSMENT | | |
| 1. Enter amount from Part V, line 5, Alternative Minimum Assessment (Gross Receipts) | 1 | |
| 2. Enter amount from Part IV, line 5, Alternative Minimum Assessment (Gross Profits) | 2 | |
| 3. Maximum Alternative Minimum Assessment | 3 | \$5,000,000 |
| 4. For the first privilege period, the taxpayer has the option to select the computation of the Alternative Minimum Assessment on line 1 or 2. However, once selected, the method must be employed for that privilege period, and for the next succeeding four privilege periods. Enter your selection on line 4 | 4 | |
| 5. Amount of Tax - enter the lesser of line 3 or line 4. Enter this amount on line 14, page 1 of the CBT-100. If taxpayer is part of an affiliated group claiming the AMA Threshold Limit, enter zero on line 14 and go to Part VII | 5 | |
| PART VII KEY CORPORATION ELECTION | ' | |
| 1. Enter the name of the elected Key Corporation | | |
| 2. Enter the FID Number of the Key Corporation | | |
| 3. Enter the AMA tax from Part VI, line 5 | 3 | |
| 4. Enter the CBT liability from CBT-100, page 1, line 13, or the minimum tax, whichever is greater | 4 | |
| 5. Excess AMA over CBT - line 3 minus line 4 (If less than zero, enter zero) | 5 | |

| SCHEDULE B BALANCE SHEET AS OF,, | |
|----------------------------------|--|
|----------------------------------|--|

Figures appearing below must be the same as year-end figures shown on the taxpayer's books. If not, explain and reconcile on rider. Consolidated returns are not permitted. See instruction 23.

| reconcile on rider. Consolidate Assets | | Beginning of Tax Year | End of Tax Year |
|---|--------------------------|-----------------------------------|-----------------|
| 1. Cash | | | |
| Trade notes and accounts receivable | | | |
| (a) Reserve for bad debts | (| , | (|
| Loans to stockholders / affiliates | | , | |
| Stock of subsidiaries | | | |
| 5. Corporate stocks | | | |
| Bonds, mortgages and notes | | | |
| New Jersey State and Local government obligation | ations | | |
| 8. All other government obligations | | | |
| Patents and copyrights | | | |
| 10. Deferred charges | | | |
| 11. Goodwill | | | |
| 12. All other intangible personal property (itemize) | | | |
| 13. Total intangible personal property (total lines 1 | to 12) | | |
| 14. Land | | | |
| 15. Buildings and other improvements | | | |
| (a) Less accumulated depreciation | (|) | (|
| 16. Machinery and equipment | | , | |
| (a) Less accumulated depreciation | (|) | (|
| 17. Inventories | , | , | |
| 18. All other tangible personalty (net) (itemize on r | rider) | | |
| 19. Total real and tangible personal property (total | | | |
| 20. Total assets (add lines 13 and 19) | , | | |
| Liabilities and Stockholder's Equity | | | |
| 21. Accounts payable | | | |
| 22. Mortgages, notes, bonds payable in less than ' | 1 year (attach schedule) | | |
| 23. Other current liabilities (attach schedule) | | | |
| 24. Loans from stockholders / affiliates | | | |
| 25. Mortgages, notes, bonds payable in 1 year or r | more (attach schedule) | | |
| 26. Other liabilities (attach schedule) | | | |
| 27. Capital stock: (a) Preferred stock | | | |
| (b) common stock | | | |
| 28. Paid-in or capital surplus | | | |
| 29. Retained earnings - appropriated (attach sched | dule) | | |
| 30. Retained earnings - unappropriated | | | |
| 31. Adjustments to shareholders' equity (attach sch | nedule) | | |
| 32. Less cost of treasury stock | | | |
| 33. Total liabilities and stockholder's equity (total lir | nes 21 to 32) | | |
| SCHEDULE C RECONCILIATION OF INCOME | PER BOOKS WITH INCOME | PER RETURN (See Instruction | 24) |
| Net income per books | TI TI | me recorded on books this year no | |
| 2. Federal income toy | inclu | ded in this return (itemize) | |

| Net income per books Federal income tax Excess of capital losses over capital gains Income subject to tax not recorded on books this year (itemize) | included in this return (itemize) (a) Tax-exempt interest \$ (b) (c) |
|---|--|
| 5. Expenses recorded on books this year not deducted in this return (itemize) (a) Depreciation \$ | 8. Deductions in this tax return not charged against book income this year (itemize) (a) Depreciation \$ (b) Contributions Carryover \$ 9. Total of lines 7 and 8 |
| 6. Total of lines 1 through 5 | 10. Income (Item 28, Schedule A) - line 6 less 9 |

| NAME AS SHOWN ON RETURN | | | | FEDI | ERAL ID NUMB | ER | |
|--|--|---|--|---|------------------------------|-----------------|-------------------------|
| SCHEDULE C-1 ANALYSIS | S OF UNAPPROPRIATED RET | TAINED EARNI | NGS PER B | OOKS (Se | e Instruction | 24) | |
| Balance at beginning of year | | | . Distribution | • | | | |
| 2. Net income per books | | | (a) Cash \$ | | | | |
| 3. Other increases (itemize) | | | | | | | |
| | | | . , | | | | |
| | | 6 | 6. Other decreases (itemize) | | | | |
| | | | | | | | |
| | | 7 | . Total of line | es 5 and 6 | | | |
| 4. Total of lines 1, 2 and 3 | | 8 | . Balance er | nd of year (| line 4 less 7) | | |
| | INFORMATION (See Instruct PAYERS MUST ANSWER THE | | QUESTIONS | S. RIDERS | MUST BE P | ROVIDED WI | HERE NECESSARY. |
| Type of business Principal products handled Internal Revenue Center when | e corresponding Federal tay re | turn was filed | | | | | |
| 2. FINAL DETERMINATION OF I Has a change or correction in consolidated with the reporting "Yes" or "No" | NET INCOME BY FEDERAL G the amount of taxable income of corporation, been finally deter If "Yes", an amed tions own beneficially, or control | OVERNMENT of the reporting mined by the Irended return model, a majority of | corporation ternal Rever nust be filed the stock of | or for any conue Service l. taxpayer co | e, and not prev | viously reporte | ed to New Jersey? |
| "Yes" or "No" | | | ow (Attach r | | | | |
| Name of Controlled C | corporations | Owned or (| | By Whom Controlled | | | |
| | | | | | | | |
| 4. Is the capital stock of the taxp Annual Report to stockholders 5. Is this corporation a Profession United States, a state, or politic | for the period covered by this in all Corporation (PC) formed pu | return. ursuant to NJS/ | ۹ 14A:17-1 و | et.seq. or a | ny similar law | from a posse | |
| How many licensed profession Attach a rider providing the nar is greater than 2, complete Sci | mes, addresses, and FID or SS | numbers of the | e licensed pr | ofessionals | in the PC. If | the number o | f licensed professional |
| | | ed in entire net ne, the source, t | income at lir he deductior | ne 38 of Sch | nedule A. "Ye amount of fore | eign taxes pai | |
| SCHEDULE F CORE | PORATE OFFICERS - GENER | AL INFORMAT | ION AND C | OMPENSA' | TION (See Ins | struction 26) | |
| (1) | (2) | (3) | | (4) | | 5) | (6) |
| Name and Current Address of Officer | Social Security Number | Title | | Employed position | Percent of (Stock (| | Amount of Compensation |
| | | | 110111 | 10 | Common | Treiened | Compensation |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | S | | | | | - | |
| . , | ers claimed elsewhere on the r | | | | | - | |
| (c) Balance of compensation of | officers (enter here and on Sch | nedule A, line 1 | 2, page 2) | | | | |

| NAME AS SHOWN ON RETURN | | | | | FEDERAL ID NU | JMBER | | |
|--|------------------------------|--------------------------|-----------------|---------------|-------------------|---------|-------------------|------------------|
| SCHEDULE G - PART I | INTEREST (See In | nstruction 27) | | | | | | |
| Was interest paid, accrued or incu "Yes" or "No" | | | | e net inco | me? | | | |
| Name of Related Memb | | Federal ID I | | Rela | tionship to Taxpa | /er | Amou | unt Deducted |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| (a) Total amount of interest deducted | ed | | | | | | | |
| (b) Less: Exceptions (see instruction | on 27) | | | | | | (|) |
| (c) Balance of interest deducted (ca | arry to Schedule A, li | ine 30) | | | | | | |
| SCHEDULE G - PART II | INTEREST EXPEN | NSES AND COS | STS AND INT | ANGIBLE | EXPENSES ANI | cos | TS (See Instr | uction 27) |
| Were intangible expenses and co entire net income? "Yes" or | sts including intangib | | | | | d to re | lated member | s, deducted from |
| Name of Related Member | Federal ID | | elationship to | | Type of Intang | | Amo | unt Deducted |
| | | | • | | Expense Dedu | cted | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| (a) Total amount of intangible exper | | | | | | | | |
| (b) Less: Exceptions (see instruction | | | | | | | (| , |
| (c) Balance of intangible expenses SCHEDULE H TAXES | (See Instructions 1 | | ule A, line 33(| (a)) | | | | |
| | Il taxes paid or accr | ued during the a | | | | Sched | | |
| | (a) Corporation | (b) Corporation | | (c) operty | (d) U.C.C. or | | (e) ther Taxes | (f) Total |
| | Franchise/Business Taxes* | Business/Occup Taxes* | | axes | Payroll Taxes | | ch schedule) | Total |
| New Jersey Taxes | | | | | | | | |
| 2. Other States & U.S. Possessions | | | | | | | | |
| 3. City and Local Taxes | | | | | | | | |
| 4. Taxes Paid to Foreign Countries | | | | | | | | |
| 5. Total | | | | | | | | |
| 6. Combine lines 5(a) and 5(b) | | | | | | | | |
| Sales & Use Taxes Paid by a Utility Vendor | | | | | | | | |
| 8. Add lines 6 and 7 - Carry to Schedule A, line 31. | | | | | | | | |
| 9. Federal Taxes | | | | | | | | |
| 10. Total (Combine line 5 and line 9) | | | | | | | | |
| *Include on line 4 taxes paid or accrue | d to any foreign cour | ntry, state, provir | nce, territory, | or subdivi | sion thereof. | | | |

NAME AS SHOWN ON RETURN FEDERAL ID NUMBER

SCHEDULE J Parts I, II, III, IV, V and VI

ALL TAXPAYERS WHO MAINTAIN A REGULAR PLACE OF BUSINESS OUTSIDE OF NEW JERSEY REGARDLESS OF THE AMOUNT OF ENTIRE NET INCOME REPORTED ON SCHEDULE A, LINE 38, OF THE CBT-100 SHOULD COMPLETE SCHEDULE J. THIS SCHEDULE SHOULD BE OMITTED IF THE TAXPAYER DOES NOT MAINTAIN A REGULAR PLACE OF BUSINESS OUTSIDE THIS STATE OTHER THAN A STATUTORY OFFICE, IN WHICH CASE THE TAX LAW REQUIRES THE ALLOCATION FACTOR TO BE 100% (1.000000).

| PART I ALL ALLOCATING COMPANIES MI | IST ANSWER THE FOLLOW! | NG OI | IESTIONS (See Instru | ction 31) | | | | | | |
|--|-----------------------------------|--------------|---------------------------|-----------|-----------------------|-------|-------|----------|----------|--------|
| (a) State the number of regular corporate places of | | | • | , | | | | | | |
| (b) List the address of at least one such regular pla | | 0.0 | to (edo metraction o res | // | | | | | | |
| (c) List the States in which the taxpayer maintained | | olace o | of business, indicating t | pe of es | tablishm | ent, | such | as w | areho | ouse, |
| factory, store, office, etc. | | | | | | | | | | |
| (d) Give the address of every factory, warehouse, | store, or other place of business | s in Ne | w Jersey, indicating type | e of esta | ablishme | nt | | | | |
| (e) Number of people employed (average) in New | Jersey | | outside New Jers | | | | | | | |
| (f) Explain in detail internal controls used in distrib | - | | | - | | | | | | |
| | | | | , - | | | | | | |
| (g) State the location of the actual seat of manage | | on | | | | | | | | |
| PART II AVERAGE VALUES (See Instruction | | muat h | a completed by every t | avnavor (| ontitlad t | 0.00 | مام ا | otina t | بالہ مال | nonto |
| (a) This schedule showing average values of real a(b) The average values of real and tangible persona | | | | | | | | | | |
| cost. Rented or leased property is valued at 8 | | | | | | | | | | |
| period covered by the return. All other property | | | | or leased | d, should | l be | value | ed at b | ook | value, |
| however, if no such book value exists, the mark | | | | | | ,, | | | | 20) |
| (c) The frequency upon which the amounts in Colu | | | | | | (| see i | nstruc | tion | 32). |
| ACCETC | AVERAGE VALUES ((Omit C | | struction 32) | | DIV/IC | IONI | LICE | - ONII \ | , | |
| ASSETS | Column A - New Jersey | , | nn B - Everywhere | | DIVIS | ION | USE | ONL | <i>'</i> | |
| 1. Land | | | | | | | | | | |
| Buildings and other Improvements | | | | | | | | | | |
| Machinery and Equipment | | | | | | | | | | |
| 4. Inventories | | | | | | | | | | |
| All other Tangible Personalty Owned (Itemize on Rider) | | | | | | | | | | |
| Property rented or leased (8 x Annual Rent) | | | | | | | | | | |
| 7. All other Property Used | | | | | | | | | | |
| 8. Total Real and Tangible Personal Property | | | | | | | | | | |
| PART III COMPUTATION OF ALLOCATION I | FACTOR (See Instruction 33) | | | | | | | | | |
| | | | COLUMN A (omit cents) | | | COL | UMN | lΒ | | |
| 1. Average value of the taxpayer's real and tangible person | nal property: | | | | | | | | | |
| (a) In New Jersey (Part II, Column A, line 8) | | 1(a) | | | | | | | | |
| (b) Everywhere (Part II, Column B, line 8) | | 1(b) | | | 1 | | | | | |
| (c) Percentage in New Jersey (line 1(a) divided by line | e 1(b)). Enter in Column B. | | | 1(c) | -1-4 | | 41- | | | -i (C) |
| 2. Receipts:(a) From sales of tangible personal property shipped t | o points within New Jersey. | 2(a) | | | plete by on the place | | | | | |
| (b) From services performed in New Jersey | | 2(b) | | perce | ent. Exan | nple: | | | | |
| (c) From rentals of property situated in New Jersey | | 2(c) | | 1 | 23,456 | | 1 | 2 3 | 141 | 5 6 |
| (d) From royalties for the use in New Jersey of patent | s and copyrights | 2(d) | | | 00,000 = | = • | | 2 0 | لتا | 0 0 |
| (e) All other business receipts earned in New Jersey. | (See instruction 33(d)) | 2(e) | | | | | | | | |
| (f) Total New Jersey receipts (Total of lines 2(a) to 2(e | e), inclusive, in Column A) | 2(f) | | | | | | | | |
| (g) Total receipts from all sales, services, rentals, roya | lities and other business | | | | | | | | | |
| transactions everywhere. (h) Less Nonsourced Receipts (see instruction 33(e)) | | 2(g) 2(h) | (| | | | | | | |
| | us line 2(h)) | + ` ' | | \dashv | | | | | | |
| (i) Total Everywhere Receipts allowable (line 2(g) mir | · // | 2(i) | | 0(1) | 1 | | | | | |
| (j) Percentage in New Jersey (line 2(f) divided by line | 2(I). Enter in Column B. | | | 2(j) | • | | | | + | |
| (k) Double-weighted receipts factor (Enter 2(j)) | | | | 2(k) | | | | | \perp | |
| Wages, salaries and other personal service compensat (a) In New Jersey | ion (See instruction 33(g)) | 3(a) | | | | | | | | |
| (b) Everywhere | | 3(b) | | | 7 | | | | \top | |
| (c) Percentage of New Jersey (line 3(a) divided by line | e 3(b)). Enter in Column B. | 1 | | 3(c) | • | | | | | |
| Sum of New Jersey percentages shown at lines 1(c), 2 Enter in Column B. | (j), 2(k), and 3(c) | | | 4 | | | | | \bot | |
| Allocation Factor (line 4 divided by four, or by the numb See instruction 33(h)). Enter in Column B and carry to | | - | | 5 | L | | | | \perp | |

| PART IV | COMPUTATION OF THROW OUT RECEIPTS | (See Instruction 34) |
|---------|-----------------------------------|----------------------|

| Name of the Jurisdiction in which Receipts are Sourced | Total Receipts from all Sales, Services, Rental, Royalties, and Other Business Transactions |
|--|--|
| 1. | |
| 2. | |
| 3. | |
| 4. | |
| 5. | |
| 6. | |
| 7. | |
| 8. | |
| 9. | |
| 10. | |
| TOTAL - Add lines 1 through 10. Carry to Schedule J, Part III, line 2(h) | |

| PART V F | KEY CORPORATION | DESIGNATION | (See instruction | 35 |
|----------|-----------------|-------------|------------------|----|
|----------|-----------------|-------------|------------------|----|

All taxpayers claiming the throw out limitation must designate a key corporation and complete Part VI below. The key corporation will be responsible for remitting the additional tax. The key corporation must complete Form 400.

| 10 | mitting the additional tax. The key corporation must complete it offit 400. | | |
|-----|---|-----|-----|
| N | ame:FID# | | |
| P | ART VI COMPUTATION OF THE THROW OUT TAX EFFECT FOR LIMITATION (See Instruction 35) | | |
| 1. | Entire net income from Schedule A, line 38 | 1. | |
| 2. | Allocation factor from Schedule J, line 5. | 2. | |
| 3. | Allocated net income - Multiply line 1 by line 2 | 3. | |
| 4. | Tax Rate (See Instruction 11(a)) | 4. | |
| 5. | Gross Tax Liability - Multiply line 3 by line 4 | 5. | |
| 6. | Less Tax Credits | 6. | () |
| 7. | Net Tax Liability - line 5 minus line 6 | 7. | |
| 8. | Property Fraction (Schedule J, Part III, line 1(c)) | 8. | |
| 9. | Wage Fraction (Schedule J, Part III, line 3(c)) | 9. | |
| 10. | Total New Jersey Receipts (Schedule J, Part III, line 2(f)) | 10. | |
| 11. | Total Everywhere Receipts (Schedule J, Part III, line 2(g)) | 11. | |
| 12. | Receipts Fraction (line 10 divided by line 11) | 12. | |
| 13. | Double Weight Receipts (enter amount from line 12) | 13. | |
| 14. | Total (line 8 plus line 9 plus line 12 plus line 13) | 14. | |
| 15. | Allocation Factor (line 14 divided by 4) Carry to Page 1, line 2 | 15. | |
| 16. | Entire Net Income from Schedule A, line 38 | 16. | |
| 17. | Allocated Net Income - Multiply line 15 by line 16 | 17. | |
| 18. | Tax Rate (from line 4) | 18. | |
| 19. | Gross Tax Liability - Multiply line 17 by line 18 | 19. | |
| 20. | Less Tax Credits | 20. | () |
| 21. | Net Tax Liability (line 19 minus line 20) | 21. | |
| 22. | Throw Out Tax Income (line 7 minus line 21) This amount should be carried to Form 400 of the CBT-100 filed by the designated key corporation. | 22. | |

SCHEDULE L

INVESTMENT COMPANIES (See Instruction 36)

- 1. DEFINITION OF INVESTMENT COMPANY: "Investment company" shall mean any corporation whose business during the period covered by its report consisted to the extent of at least 90% thereof, of holding, investing and reinvesting in stocks, bonds, notes, mortgages, debentures, patents, patent rights and other securities, for its own account. But this shall not include any corporation which: (1) is a merchant or a dealer of stocks, bonds and other securities, regularly engaged in buying the same and selling the same to customers; or (2) had less than 90% of its average gross assets in New Jersey, at cost, invested in stocks, bonds, debentures, mortgages, notes, patents, patent rights or other securities or consisting of cash on deposit during the period covered by its report; or (3) is a banking corporation or a financial business corporation as defined in the Corporation Business Tax Act.
- 2. NOTE: If taxpayer does not qualify under this definition, it is not entitled to report as an investment company.
- In order to qualify as an investment company, taxpayer must submit a schedule showing that it meets the following three-part business test and the assets test.
 - (a) i Income Adjusted: For purposes of the 90% requirement above, taxpayer, during the entire period covered by its report, must have derived 90% or more of its total income before deductions as reported for Federal income tax purposes from cash and/or investment type assets. Total income before deductions as reported for Federal income tax purposes must be adjusted as follows:
 - Add gross receipts or gross sales adjusted for gross profit (loss) reported for Federal income taxes;
 - (2) Add gross sales price from the disposition of assets adjusted for capital gain or loss or net gain or loss reported for Federal income taxes;
 - (3) Add interest on Federal, State, municipal and other obligations included in determining New Jersey net income, but not otherwise included in Federal total income;

- (4) Do not add any capital loss carry back or carry forward in computing total income.
- ii Income Unadjusted: For purposes of the 90% requirement above, taxpayer during the entire period covered by its report, must have derived 90% or more of its total income before deductions as reported for Federal income tax purposes from cash and/or investment type assets, plus interest on Federal, State municipal and other obligations not otherwise included in Federal taxable income and exclusive of any capital loss carry back or carry forward.
 - (1) A gain resulting from the disposition of an asset and reported on the installment basis for Federal income taxes is considered income for purposes of the investment company statute in the year in which the installment is received under both 3(a) i and ii above. Income reported on the installment basis is treated as investment type income only if it is generated by the sale of an investment type asset. Interest income received in conjunction with each installment is deemed investment type income.
- iii Deductions: For purposes of the 90% requirement above, taxpayer, during the entire period covered by its report, must have incurred 90% or more of its total deductions as reported for Federal income tax purposes for holding, investing and reinvesting in cash and/or investment type assets.
- (b) Assets test: For purposes of the 90% requirement provided by 1.(2) above, at least 90% of the taxpayer's gross assets located in New Jersey, valued at cost, must consist of cash and/or investment type assets, during the period covered by its report.
- The election to report as an investment company is effective only for the particular year covered by the return and if desired for a subsequent year must be renewed.
- 5. The minimum tax for an investment company is \$500.00.

SCHEDULE M REGULATED INVESTMENT COMPANIES AND REAL ESTATE INVESTMENT TRUSTS

REGULATED INVESTMENT COMPANIES GENERAL INFORMATION (See Instruction 37)

| Company Act of 1940 (54 Stat. 789 |), as amended)? | |
|---|---|---|
| "Yes" or "No" | | |
| If "Yes", give registration number Securities and Exchange Commiss | · · | е |
| Reg No | Date | |
| IMPORTANT NOTE: If the taxpaye obtained prior to the commencement or if such authority was not continuous the taxpayer is not entitled to recompany. | nt of the period covered in the retur ued during such entire period, the | n |

1. Is this taxpaver registered and regulated under the Federal Investment

 Has the taxpayer satisfied the requirements of Chapter 1, Subchapter M, Part I, Section 852(a) of the Federal Internal Revenue Code? "Yes" or "No" ______. If "No", taxpayer is not entitled to report as a Regulated Investment Company.

- Every taxpayer seeking to report as a regulated investment company MUST SUBMIT WITH THIS RETURN ITS PRINTED ANNUAL REPORT TO STOCKHOLDERS for the period covered by this return together with all other stockholder reports issued by the company during such period.
- 4. The tax liability for a Regulated Investment Company is \$500.00 and should be reported on Line 9, page 1 of the return.

REAL ESTATE INVESTMENT TRUSTS GENERAL INFORMATION (See Instruction 37)

| 1. | Is the taxpayer a corporation, unincorporated trust or unincorporated |
|----|---|
| | association which is qualified and has elected to be taxed as a rea |
| | estate investment trust under Federal law? |

| "Yes" | or | "No" | | | | |
|-------|----|------|--|--|--|--|
| | | | | | | |

| SCHEDULE P S | IIDGIDIADV INI | /EQTME | INT ANALY | /SIS /Sa | - Inctruc | tion 40\ | | | | |
|--|------------------------------------|------------------------|-----------------|---------------------|-------------|-----------------|---------------------|-------------|-----------|-----------------------------------|
| NOTE: Taxpayers must hold at lea | SUBSIDIARY IN ast 80% of the combi | | | ` ` | | | least 80% of | the tota | al num | ber of shares of all other classe |
| of stock, except non-voting | | | | | | | | | | diaries in book value. |
| (1) | | | | (2) je of Intere | s t | | (3) Book Value | | | (4) Dividend Income |
| Name of Subsidi | iary | - | Voting | Non-\ | | 1 | ted in Sche | dule B | () | (as reported in Schedule A) |
| | | | | | | | | | | |
| | | | | | | | | | + | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Totals | | | | | | | | | | |
| | ARTNERSHIP I | | | | | ction 41) | | | | |
| (1) | | (2) | (3) | (4 | | 1 | 5) | (6 | 6) | (7) |
| Name of Partnership | | Date and | Percentage | Limited | General | Tax Accour | iting Method | New . | Jersey | Tax Payments Made on Behal |
| LLC, or Other Entity and Federal | | ate where Organized | of Ownership | Partner | Partner | Flow Through | Separate Accounting | Ne Yes | xus No | of Taxpayer by Partnerships |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Total Column 7 | | | | | | | | | | |
| SCHEDULE PC | PER CA | PITA LIC | CENSED P | ROFESS | IONAL F | EE (See Ir | struction | 42) | | |
| 1 (a). Enter number of resident a | | | | | | | | Ť | | |
| New Jersey | x \$150 . | | | | | | | 1 | (a) | |
| 1(b). Enter number of non-reside New Jersey | | | | | | | | 1 | (b) | |
| 1(c). Total Fee Due - Add lines | 1(a) and line 1(b) | | | | | | | 1 | (c) | |
| 2. Installment Payment - 50% | % of line 1(c) | | | | | | | 2 | 2 | |
| 3. Total Fee Due (line 1(c) plu | us line 2) | | | | | | | 3 | 3. | |
| 4. Less prior year 50% install | lment payment an | d credit (i | f applicable) | | | | | 4 | . (| |
| 5. Balance of Fee Due (line 3 | 3 minus line 4). If | the result | is zero or a | bove, ente | r this amo | unt on page | 1, line 19 | 5 | j. | |
| 6. Credit to next year's Profes | ssional Corporation | n Fee (if | line 5 is belo | ow zero, en | iter the am | nount here) | | 6 | j. | |
| | LIFIED SUBCH | | | | | | | | | |
| | | | | | | | | | | |
| Does this corporation own a If yes, list all the QSSS's na | | | | | | | | | | |
| made a New Jersey QSSS | | | | | | | | , | | |
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| SCHEDULE R D | IVIDEND EXCL | .USION | (See Instru | iction 43) |) | | | | | |
| 1. Dividend income included in | in Schedule A | | | | | | | | 1. | |
| 2. Less: Dividend Income - S | Schedule P, Colum | n (4) | | | | | | | 2. (| |
| 3. Balance (line 1 less line 2) | | | | | | | | | 3. | |
| 4. Less: Dividend income from | | | | | | | | | | |
| 50% of all other classes of | | | | | | | | <u> </u> . | 4. (| |
| 5. Balance (line 3 less line 4) | | | | | | | | [] | 5. | |
| , , , , | | | | | | | | | | |

7. DIVIDEND EXCLUSION: Line 2 plus line 6 (Carry to Schedule A, line 37)

| SCH | EDULE S - PART I DEPRECIATION AND SAFE HARBOR LEASING (See Instruction | n 44) |
|--------------|--|---------|
| 1. 5 | Section 179 Deduction | 1 |
| 2. 8 | Special Depreciation Allowance - for certain property acquired after September 10, 2001 | 2 |
| 3. N | MACRS - for assets placed in service during accounting periods beginning on and after July 7, 1993 | 3 |
| 4. N | MACRS - for assets placed in service during accounting periods beginning prior to July 7, 1993 | 4 |
| 5. <i>F</i> | ACRS | 5 |
| 6. 0 | Other Depreciation - for assets placed in service after December 31, 1980 | 6 |
| 7. (| Other Depreciation - for assets placed in service prior to January 1, 1981 | 7 |
| 8. L | isted Property - for assets placed in service during accounting periods beginning on and after July 7, 1993 | 8 |
| 9. L | isted Property - for assets placed in service during accounting periods beginning prior to July 7, 1993 | 9 |
| 10. T | Total depreciation claimed in arriving at line 28, Schedule A | 10 |
| | Attach Federal Form 4562 to Return and Include Federal Depreciation Workshe | |
| | | |
| 44 4 | Adjustments at Line 32, Schedule A - Depreciation and Certain Safe Harbor Lease Trans | actions |
| | Additions a) Amounts from lines 4, 5, 6 and 9 above | |
| , | | |
| (| b) Special Depreciation Allowance - for assets placed in service during accounting periods beginning on and after January 1, 2002, and for which federal 30% or 50% bonus depreciation was taken. Include the initial 30% or 50% bonus amount and the regular depreciation on the adjusted basis b | _ |
| (| c) Distributive share of ACRS and MACRS from a partnership c | |
| (| d) Deductions on Federal return resulting from an election made pursuant to IRC Section 168(f)8 exclusive of elections made with respect to mass commuting vehicles. | |
| | Interest | |
| | Rent | |
| | Amortization of Transactional Costs | |
| | Other Deductions | |
| (| e) Section 179 depreciation in excess of \$25,000. Fiscal year filers refer | |
| ` | to instruction 44 | _ |
| | Total line 11 (lines a, b, c, d and e) | 11 |
| 12. [| Deductions | |
| (| a) New Jersey depreciation - (From Schedule S, Part II(A)) | |
| (| b) New Jersey depreciation - (From Schedule S, Part II(B)) b | |
| (| c) Recomputed depreciation attributable to distributive share of recovery property from a partnership | _ |
| (| d) Any income included in the return with respect to property described at line 11(d) solely as a result of that election | |
| (| e) The lessee/user should enter the amount of depreciation which would have been allowable under the Internal Revenue Code at December 31, 1980 had there been no safe harbor lease election | |
| (| f) Excess of accumulated ACRS, MACRS, or bonus depreciation over accumulated NJ depreciation on physical disposal of recovery property (attach computations) . f. | |
| | Total line 12 (lines a, b, c, d, e and f) | 12 |
| 13 / | AD ILISTMENT - (line 11 minus line 12) Enter at line 32 Schedule A | 13 |

NAME AS SHOWN ON RETURN FEDERAL ID NUMBER

| SCHEDULE S - PART II(A) | N.J. Depreciation on Recovery Property Placed in Service On or After January 1, 1981 and Prior to |
|-------------------------|---|
| | Taxpayers Fiscal or Calendar Accounting Periods Beginning On and After July 7, 1993. |

| (A) Description of Property | (B) Month, Day and Year placed in service* | (C) Use Federal basis | (D) Depreciation allowable in earlier years | (E) Method of figuring depreciation | (F) Life or rate | (G) N.J. depreciation computations |
|---|--|-----------------------|---|-------------------------------------|---------------------|------------------------------------|
| * Year placed in service acc DO NOT USE "VARIOUS" Class Life Asset Depreciation | IN ANY COLUMN. | | Attach Computations | | | |
| | | | | | | |
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INSTRUCTIONS

- Column A Do not classify as 3, 5, 10 or 15 year property. Classify consistent with Internal Revenue Code at December 31, 1980.

 Account for distributive share of partnership property and deductions separately. Do not include certain safe harbor lease property.
- Column B Clearly segregate property placed in service during each year.

 Depreciation on personal property is to be computed using the half-year convention such that one half year depreciation is to be claimed to the exclusion of any other depreciation convention allowable under the Internal Revenue Code at December 31, 1980 for property placed in service during the current year.
- Column C Basis is to be determined at the date property is placed in service and not as provided under the Internal Revenue Code at December 31, 1980. It is not to be restated where ACRS was accepted for certain property placed in service during 1981.
- Column D Depreciation allowable under the method adopted and

- consistently applied for property described. Do not adjust for the effect of any ACRS deducted on the New Jersey Corporation Business Tax Return for property placed in service during 1981.
- Column E Any method allowable under the Internal Revenue Code at December 31, 1980.
- Column F Any life or rate permissible under the Internal Revenue Code at December 31, 1980. (LIVES PERMISSIBLE UNDER THE IRS CODE AT DECEMBER 31, 1980 FREQUENTLY DIFFER FROM ACRS AND MACRS LIVES)
- Column G Consider any salvage value which was required to be considered under Internal Revenue Code at December 31, 1980. Do not claim depreciation in the year of disposal. Accumulated depreciation may not exceed accumulated ACRS and MACRS deductions over the life of the property and deductions for the final year or years are limited where ACRS was deducted on the New Jersey return for property placed in service during 1981.

SCHEDULE S - PART II(B) Special Depreciation Allowance - for assets placed in service during accounting periods beginning on and after January 1, 2002, and for which federal 30% or 50% bonus depreciation was taken.

| (A) Description of Property | (B) Month, Day and Year placed in service* | (C) Use Federal basis | (D) Special Depreciation Allowance | (E) Depreciation allowable in earlier years | (F) Method of figuring depreciation | (G) Life or rate | (H) N.J. Depreciation Computations |
|-----------------------------|--|-----------------------|---|---|--|---------------------|------------------------------------|
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^{*}Year placed in service acceptable for personal property only.

Column A - Classify consistent with Internal Revenue Code.

INSTRUCTIONS

- Column B Clearly segregate property placed in service during each year.
- Basis is to be determined at the date property is placed in Column C service and not as provided after taking the 30% or 50% firstyear depreciation allowance.
- Column D -State the amount of the 30% or 50% special depreciation allowance taken for the first year the property was placed in service.
- Column E:
- Depreciation allowable under the method adopted and consistently applied for property described. Do not adjust for the effect of the 30% or 50% first-year bonus depreciation allowance.
- Column F Use the same method that was used for Federal purposes.
- Column G Use the same life that was used for Federal purposes.
- Column H Figure the depreciation amount as if the 30% or 50% special depreciation allowance was not in effect.

NAME AS SHOWN ON RETURN FEDERAL ID NUMBER

| SCHEDULE S - PART III | NEW JERSEY DEPRECIATION FOR GAS, ELECTRIC, AND GAS AND ELECTRIC PUBLIC UTILITIES (See Instruction 44) |
|---------------------------------|---|
| 1. Total depreciation claimed | d in arriving at Schedule A, line 28 |
| 2. Federal depreciation for a | assets placed in service after 1-1-98 2. |
| 3. Net (Subtract line 2 from li | line 1) |
| 4. New Jersey depreciation a | allowable on the Single Asset Account (Assets placed in service prior to 1-1-98) |
| (a) Total adjusted Federal | depreciable basis as of 12-31-97 a |
| • • | ble basis over Federal tax basisb |
| ` ' | deral basis for all Single Asset Account or disposed of to date |
| (d) Total (line 4a plus line | 4b less line 4c) |
| 5. New Jersey Depreciation | (Divide line 4(d) by 30) |
| 6. New Jersey Adjustment | |
| . , , | ent for assets placed in service prior to from line 3) |
| | ation adjustment from Schedule S, |
| 7. Total Adjustment (add line | es 6(a) and 6(b)). Enter at line 32, Schedule A |

State of New Jersey Division of Taxation

CERTIFICATION OF INACTIVITY

| the period beginning | , and ending | , |
|--|---|----------------------|
| ition Name | Federal ID Number | |
| | | |
| (NOTE: Attach this schedule to the | e taxpayer's CBT-100 or CBT-100S, which | never is applicable) |
| | | |
| | | |
| | | |
| | | |
| | | |
| I certify that during the period covered business activities, no income, no assets | s, and, additionally in the case of a New | |
| | s, and, additionally in the case of a New | |
| business activities, no income, no assets | s, and, additionally in the case of a New | |
| business activities, no income, no assets | s, and, additionally in the case of a New | |

INSTRUCTIONS

In lieu of completing the entire CBT-100 or CBT-100S tax return, an inactive corporation may complete this schedule and Schedule A-4 and attach them to a completed page 1 of the appropriate Corporation Business Tax return in order to fulfill its filing obligations with the State of New Jersey. An inactive corporation is a corporation that, during the entire period covered by the tax return, did not conduct any business, did not have any income, receipts or expenses, did not own any assets, and, additionally for New Jersey S corporations, did not make any distributions and did not have any change in ownership.

This schedule and Schedule A-4 must be completed and attached to page 1 of each Corporation Business Tax return filed annually by the taxpayer. Taxpayers must report the minimum tax liability and the installment payment (if applicable) on page 1 of the Corporation Business Tax return and submit the balance due with the Form CBT-100-V or Form CBT-100S-V, the Corporation Business Tax Payment Voucher.

Schedule I and page 1 of the Corporation Business Tax return must be signed by an officer of the corporation who is authorized to attest to the truth of the statements contained therein.